

Debtor 1

Faris Abusharif

First Name Middle Name Last Name

Case number (if known)

Unsecured claim

3 Old Second National Bank

Creditor's Name

c/o Larry M Amoni, Esq.

Number Street

1975 W Downer Pl. #301

Aurora

IL

60506

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim?

\$225,701.85

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

4 Old Plank Trail Community Bank, N.A.

Creditor's Name

c/o Chuhak & Tecson, P.C.

Number Street

30 S Wacker Dr., Suite 2600

Chicago

IL

60606

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim?

\$218,456.39

As of the date you file, the claim is: Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

5 Illinois Department of Revenue

Creditor's Name

Bankruptcy Unit

Number Street

PO Box 19035

Chicago

IL

62794-9035

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim? Taxes & Other Government Units

\$110,208.18

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

6 Pawnee Leasing Corporation

Creditor's Name

c/o ILLINOIS CORPORATION SERVICE

Number Street

801 ADLAI STEVENSON DRIVE

Springfield

IL

62703

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim? All Personal Property

\$89,988.00

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

7 PNC Bank, National Association

Creditor's Name

c/o Martin Wasserman

Number Street

216 S. Dearborn St. #504

Chicago

IL

60661

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim?

\$87,169.06

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☒ Yes. Total claim (secured and unsecured): \$87,169.06
Value of security: - \$
Unsecured claim \$87,169.06

Debtor 1 Faris Abusharif
First Name Middle Name Last Name

Case number (if known) _____

			Unsecured claim
8	JPMCB Card <small>Creditor's Name</small> <u>PO Box 15369</u> <small>Number Street</small> <u>Wilmington</u> <u>DE</u> <u>19850</u> <small>City State ZIP Code</small> <small>Contact</small> <u>800-945-2000</u> <small>Contact phone</small>	What is the nature of the claim? <u>Credit Card Debt</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$29,401.00
9	Suntrust Bank <small>Creditor's Name</small> <u>PO Box 85526</u> <small>Number Street</small> <u>Richmond</u> <u>VA</u> <u>23285</u> <small>City State ZIP Code</small> <small>Contact</small> <u>877-596-5407</u> <small>Contact phone</small>	What is the nature of the claim? <u>Monies Loaned / Advanced</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$27,215.00
10	Suntrust Bank <small>Creditor's Name</small> <u>PO Box 85526</u> <small>Number Street</small> <u>Richmond</u> <u>VA</u> <u>23285</u> <small>City State ZIP Code</small> <small>Contact</small> <u>877-596-5407</u> <small>Contact phone</small>	What is the nature of the claim? <u>Monies Loaned / Advanced</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$22,934.00
11	Bank of America <small>Creditor's Name</small> <u>PO Box 982238</u> <small>Number Street</small> <u>El Paso</u> <u>TX</u> <u>79998-2235</u> <small>City State ZIP Code</small> <small>Contact</small> <u>800-421-2110</u> <small>Contact phone</small>	What is the nature of the claim? <u>Credit Card Debt</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$19,397.14
12	Illinois Department of Revenue <small>Creditor's Name</small> <u>Bankruptcy Unit</u> <small>Number Street</small> <u>PO Box 19035</u> <u>Chicago</u> <u>IL</u> <u>62794-9035</u> <small>City State ZIP Code</small> <small>Contact</small> <small>Contact phone</small>	What is the nature of the claim? <u>Taxes & Other Government Units</u> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$18,921.61

Debtor 1 Faris Abusharif
First Name Middle Name Last Name

Case number (if known) _____

Unsecured claim

13	Citi Cards/Citibank, N.A. <small>Creditor's Name</small> c/o Midland Credit Mgmt. <small>Number Street</small> 320 E Big Beaver Rd., Ste. 300 Troy MI 48083 <small>City State ZIP Code</small> <small>Contact</small> 800-843-0777 <small>Contact phone</small>	What is the nature of the claim? <u>Credit Card Debt</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$15,298.00
14	AES/Deutsche <small>Creditor's Name</small> PO Box 61047 <small>Number Street</small> Harrisburg PA 17106 <small>City State ZIP Code</small> <small>Contact</small> 800-233-0557 <small>Contact phone</small>	What is the nature of the claim? <u>Student Loans</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$11,697.00
15	Discover Financial Services <small>Creditor's Name</small> PO Box 15316 <small>Number Street</small> Wilmington DE 19850 <small>City State ZIP Code</small> <small>Contact</small> 800-347-2683 <small>Contact phone</small>	What is the nature of the claim? <u>Credit Card Debt</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$1,340.00
16	SYNBC/PPMC <small>Creditor's Name</small> PO Box 965005 <small>Number Street</small> Orlando FL 32896 <small>City State ZIP Code</small> <small>Contact</small> 866-300-6432 <small>Contact phone</small>	What is the nature of the claim? <u>Credit Card Debt</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$377.00
17	Verizon Wireless <small>Creditor's Name</small> PO Box 650051 <small>Number Street</small> Dallas TX 75265 <small>City State ZIP Code</small> <small>Contact</small> 800-852-1922 <small>Contact phone</small>	What is the nature of the claim? <u>Cable / Satellite Services</u> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$300.00

Debtor 1 Faris Abusharif
First Name Middle Name Last Name

Case number (if known) _____

Unsecured claim

18 Capital One Bank USA NA
Creditor's Name
PO Box 31293
Number Street
Salt Lake City UT 84131
City State ZIP Code
Contact
800-955-7070
Contact phone

What is the nature of the claim? Monies Loaned / Advanced \$ 270.00

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☒ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?
☒ No
☐ Yes. Total claim (secured and unsecured): \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

19 William Bourke
Creditor's Name
c/o Clifford Law Offices PC
Number Street
120 N. LaSalle, Ste. 3100
Chicago IL 60602
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? Loss of Consortium (Lisa Bourke) \$ Unknown

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?
☒ No
☐ Yes. Total claim (secured and unsecured): \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

20 Lisa Bourke
Creditor's Name
c/o Clifford Law Offices PC
Number Street
120 N. LaSalle, Ste. 3100
Chicago IL 60602
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? Medical Malpractice Claim \$ Unknown

As of the date you file, the claim is: Check all that apply.
☒ Contingent
☒ Unliquidated
☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?
☒ No
☐ Yes. Total claim (secured and unsecured): \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Debtor 1

Faris Abusharif

Document

Page 6 of 7

First Name

Middle Name

Last Name

Case number (if known)

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

X /s/ Faris Abusharif

Signature of Debtor 1

X

Signature of Debtor 2

Date 02/13/2022

MM / DD / YYYY

Date 02/13/2022

MM / DD / YYYY

Debtor 1

Faris Abusharif

Document

Page 7 of 7

Case number (if known) _____

First Name

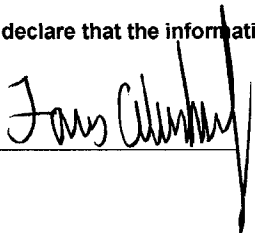
Middle Name

Last Name

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

x /s/ Faris Abusharif



x

Signature of Debtor 1

Signature of Debtor 2

Date 02/13/2022

MM / DD / YYYY

Date 02/13/2022

MM / DD / YYYY